

PART B - FEE(S) TRANSMITTAL

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959 7590 02/09/2006

LAHIVE & COCKFIELD, LLP.
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(Depositor's name)
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(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/749,770	12/30/2003	Lucio Andrade-Cetto	MWS-097	1054

TITLE OF INVENTION: SYSTEM AND METHOD FOR VISUALIZING REPETITIVELY STRUCTURED MARKOV MODELS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0		\$1400	05/09/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
BUI, BRYAN	2863	702-181000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- 1 _____
- 2 _____
- 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE MATHWORKS, INC., THE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

3 APPLE HILL DRIVE
 NATICK, MASSACHUSETTS

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
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- ☒ Advance Order - # of Copies 10

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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 120080 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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	05/10/2006	00000165	1	1501	\$1,400.00	05/08/2006	DA 120080
PTOL-85 (Rev. 0	05/10/2006	00000166	1	8001	\$30.00	05/08/2006	DA 120080 ERCE
	05/10/2006	00000167	1	1504	\$300.00	05/08/2006	DA 120080